



2018 Membership Application

Note: All members must send in an application annually to remain active.

Application type: New Renewing

First name: _____ Last name: _____

Email address (required): _____
(All communication from AAFSPHV is electronic.)

Present position title: _____ Organization: _____

Mailing address: _____

Preferred phone #: _____ Work Home Cell

Graduation year from veterinary school: _____ School: _____

Current student: School: _____ Degree Program: _____ Date Anticipated: _____

Please list other degrees and institutions that awarded those:

Degree:	Year:	Institution:
Degree:	Year:	Institution:

ALL Information in the Box above will be included in a database searchable ONLY by AAFSPHV members. However, please indicate if there is any information you would like suppressed from the directory. Please suppress: _____

Are you a current member of the American Veterinary Medical Association: Yes No

Membership Type; Dues are due by April 1

Active and Associate membership	\$ 42
Student membership	\$ 10

Notes:

- Membership categories described on page 1 of the Bylaws available at http://www.aafsphv.org/documents/AAFSPHV_bylaws.pdf.)
- "Students" are defined as persons enrolled in colleges or schools of veterinary medicine, or current veterinarians pursuing full-time study.

Payment can be made through **PayPal**, with applications automatically emailed to AAPHVet@gmail.com.

or

Send application and checks (payable to American Association of Food Safety and Public Health Veterinarians) to:

**Kelly Vest, AAFSPHV
926 S. 6th Street
Blackwell, OK 74631**